

Applicant/Serial No.: Nicholas F. D'Antonio et al. / 09/937,357  
Filed/Conf. No. 09/24/2001 / Conf. No. 7922  
Examiner/Group: Ann Y. Lam / 1641  
Amendment mailed: 11 / 29 / 2004  
Attorney File: DA7119US (#90036)

### **REMARKS**

According to the Office Action dated July 27, 2004, claims 36-47 were withdrawn from consideration; claims 31, 65 and 66 were objected to for informal matters; claims 24, 25, 51 and 63 were rejected for being indefinite under 35 U.S.C. 112, second paragraph; claims 1, 2, 5-9, 10, 12-15, 18, 19, 21, 23-35, 48-51, 53-55 and 57-79 were rejected as being anticipated by D'Antonio et al. 6,056,716; claims 3, 4, 11, 16, 17, 20, 22 and 56 were objected to as being dependent upon a rejected base claim but having allowable subject matter; and claim 52 was allowed. By the present amendment, claims 31, 65 and 66 have been revised to correct the informal matters, claims 24, 25, 51 and 63 were amended to make them proper under 35 U.S.C. 112, second paragraph, the claims rejected as being anticipated by D'Antonio et al. '716 are traversed for the reasons set forth below, and claims 80-87 have been added for submitting those claims 3, 4, 11, 16, 17, 20, 22 and 56 previously rejected but having allowable subject matter in independent form. The allowance of claim 52 is acknowledged with appreciation.

The present invention provides a hypodermic jet injection system for injecting injectate from an injectate-holding container, where (1) the forward end of a container-holding member is isolated from a housing for holding the at least one injectate container, and (2) a latching and release apparatus is spaced from both the at least one container and the front end of the container-holding member. The foregoing item (1) provides that there is no physical contact of the forward end of the container-holding member with the injection housing to avoid contact by the user with any contamination on the forward end of the container, and the foregoing item (2)

spaces the at least one container and the front end of the container-holding member away from the housing to avoid contaminating the housing. These two very important features enable the injection of humans and/or animals under both individual and mass injection processes for avoiding the transmission of such diseases as AIDS and the like which have caused tragic results and considerable fear amongst both patients and persons administering hypodermic injections under presently available hypodermic injection systems. D'Antonio et al. '716 provides a great achievement in hypodermic injection systems, but does not have structure addressing items (1) and (2) noted above.

In the Office Action to which the present Amendment is responsive, the Examiner states that holding member (capsule or injection barrel) 840 of D'Antonio et al. '716 holds the injectate cartridges with the dispensing channels directed in a common direction, but fails to note that the forward end of container-holding member 840 is not spaced from the injection housing and that the forward end of the container does have physical contact with the injection housing and does not avoid contact with any contamination on the forward end of the container—all of which are recited in claim 1 and the other rejected claims. Holding members (or barrels) 107 and 840 of D'Antonio et al. '716 are the housing. The Examiner states that D'Antonio et al. '716 discloses the proximal part of housing (cylindrical barrel) 707, but the forward end of the cartridge 845 (it is actually a thin-walled capsule 846) abuts the injection housing by abutting forward access disc 844 shown in Figures 7GG and 7GG', which constitutes the front end of housing or barrel 840 (or 707). This is described in col. 26, lines 49-61 of D'Antonio et al. '716. Referring to the embodiment shown in Figure 7E of D'Antonio et al. '716, the capsule 820 abuts the front end or lip 714 of housing or barrel 707 as shown in Figures 7E and described in col. 25, lines 62-65 of D'Antonio et al. '716.


Referring next to item (2) referred to above, the Examiner states that the latching and release apparatus (door) 708 of D'Antonio et al. '716 latches the holding member (capsule or injection barrel) 840 to the housing. However, door 708 is part of the housing as shown in Figure 7E, and door 708 engages the capsule 820 (see D'Antonio et al. '716, col. 25, lines 62-65). The Examiner also refers to item 101 in Figure 7E of D'Antonio et al. '716, alleging that this teaches that the container is spaced from the housing. However, as shown in Figure 7E, item 101 is a nozzle (col. 9, line 33) which is part of capsule (container) 820, and container 820 abuts lip 714 of the housing (col. 25, lines 62-65). Stated differently, D'Antonio '716 does not disclose a holding member. Barrels 707 and 840 are housings for capsules or containers 820 and 846. Capsule 820 engages lip 714 of housing or barrel 707 as shown in Figure 7E. Referring to Figures 7G, 7GG and 7GG', capsules 896 are each attached to forward access disk 844, which is the forward end of barrel or housing 840. In either case, the health care worker or whoever is using the hypodermic device of Figures 7E or 7GG of D'Antonio et al. '716 can easily touch the nozzle 101 or capsule 820 or exit ports 842 of capsule 846 after an injection, either accidentally or deliberately after an injection to remove the capsule, thereby facing the consequences of contamination on the capsule.

For the foregoing reasons, it is strongly urged that each of the claims rejected as being anticipated by D'Antonio et al. '716 are allowable for the important and significant reasons set forth above, and such action is earnestly solicited.

The Examiner is invited to telephone the undersigned if a telephone discussion would

expedite the prosecution of the above-identified application.

Respectfully submitted,

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Petition and fee for extension of time – Credit Card Payment Form

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